

CLAIMS ONLY

SERIAL NO. _____

FILING DATE _____

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	/						
2		1					
3		1					
4		1					
5		1					
6		1					
7		1					
8		1					
9		1					
10		1					
11	1						
12		1					
13		1					
14		1					
15		1					
16		1					
17		1					
18	2						
19	1						
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50							
TOTAL IND.	5						
TOTAL DEP.	19						
TOTAL CLAIMS	24						

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS